UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re: NINA BUTLER	Case No. 18-21406
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 07/31/2018.
- 2) The plan was confirmed on NA.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on \underline{NA} .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was dismissed on 01/15/2019.
 - 6) Number of months from filing to last payment: 2.
 - 7) Number of months case was pending: 7.
 - 8) Total value of assets abandoned by court order: NA.
 - 9) Total value of assets exempted: NA.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$550.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$550.00

\$550.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$523.05
Court Costs \$0.00
Trustee Expenses & Compensation \$26.95
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

Attorney fees paid and disclosed by debtor: \$500.00

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Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Int.
Name	Class	Scheduled	Asserted	Allowed	Paid	Paid
ALLY FINANCIAL	Secured	9,500.00	10,475.00	18,643.00	0.00	0.00
ALLY FINANCIAL	Unsecured	9,450.00	8,167.95	8,167.95	0.00	0.00
CAPITAL ONE BANK USA	Unsecured	1,300.00	NA	NA	0.00	0.00
CITIBANK SD NA	Unsecured	2,639.00	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENU	Unsecured	6,903.00	1,555.30	1,555.30	0.00	0.00
CITY OF EVANSTON	Unsecured	65.00	NA	NA	0.00	0.00
DAMAGE RECOVERY UNIT	Unsecured	356.00	NA	NA	0.00	0.00
Fed Loan Serv	Unsecured	40,000.00	NA	NA	0.00	0.00
FIRSTSOURCE ADVANTAGE LLC	Unsecured	1,300.00	NA	NA	0.00	0.00
IHC ST FRANCIS EMERGENCY PHYSI	Unsecured	587.00	587.00	587.00	0.00	0.00
IL DEPT OF REVENUE	Priority	150.00	755.29	755.29	0.00	0.00
IL DEPT OF REVENUE	Unsecured	NA	108.40	108.40	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	NA	1,008.65	1,008.65	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	1,500.00	2,052.18	2,052.18	0.00	0.00
MERCHANTS CREDIT GUIDE CO	Unsecured	137.00	NA	NA	0.00	0.00
MIDLAND FUNDING	Unsecured	0.00	2,327.55	2,327.55	0.00	0.00
PRESENCE HEALTH	Unsecured	212.00	NA	NA	0.00	0.00
Resurrection Health Care	Unsecured	85.00	NA	NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Unsecured	NA	1,936.70	1,936.70	0.00	0.00
UNITED RECOVERY SYSTEM	Unsecured	1,914.00	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	<u>Paid</u>	<u>Paid</u>
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$18,643.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$18,643.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$2,807.47	\$0.00	\$0.00
\$2,807.47	\$0.00	\$0.00
\$15,691.55	\$0.00	\$0.00
	\$0.00 \$0.00 \$18,643.00 \$0.00 \$18,643.00 \$0.00 \$0.00 \$2,807.47 \$2,807.47	Allowed Paid \$0.00 \$0.00 \$0.00 \$0.00 \$18,643.00 \$0.00 \$0.00 \$0.00 \$18,643.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$2,807.47 \$0.00 \$2,807.47 \$0.00 \$0.00 \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$550.00 \$0.00	
TOTAL DISBURSEMENTS :		<u>\$550.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 03/06/2019 By: /s/ Tom Vaughn
Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.